

Department of Commerce Personal Property

**Inventory Completion Certification Form**

Inventory Begin Date: \_\_\_\_\_

I, \_\_\_\_\_, as Personal Property Custodian for  
(Print Name and Custodian Number)  
DOC office \_\_\_\_\_ certify that the Personal Property Listing as of  
date: \_\_\_\_/\_\_\_\_/\_\_\_\_ is completed and all items have been accounted for or  
reconciled in accordance with the Department of Commerce Personal Property  
Management Manual. The inventory listing is attached with my initials placed on the  
lower right hand corner of each page acknowledging acceptance of all items of personal  
property listed on these pages.

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*(please attached any additional comments if required)*

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Printed Name: \_\_\_\_\_

Please make a copy of the signed and send the original to:

Jennifer Jessup  
FAX: 202 501-2505  
Voice: 202 482-3458  
OS Property Management Officer  
1401 Constitution Avenue, NW Room 2865  
Washington, DC 20230